

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/587329

FILING DATE

30 MAY 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	2		/			
4	2		/			
5	2		/			
6	2		/			
7	8		/			
8	0		0			
9	0		/			
10	0		/			
11	0		/			
12	0		/			
13	0		/			
14	/		0			
15	/		/			
16	2		/			
17	2		/			
18	/		/			
19	/		/			
20	/		/			
21	2		/			
22	2		/			
23	/		/			
24	/		/			
25	/		/			
26	/		/			
27	0		/			
28	0		/			
29	0		/			
30	0		/			
31	0		/			
32	0		/			
33	0		/			
34	/		/			
35	/		/			
36	2		/			
37	2		/			
38	/		/			
39	/		/			
40	/		/			
41	/		/			
42	/		/			
43	1		/			
44	2		/			
45	1		/			
46	/		/			
47	/		/			
48						
49						
50						
TOTAL IND.	14		13			
TOTAL DEP.	44	←	34	←		←
TOTAL CLAIMS	58		47			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
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98						
99						
100						
TOTAL IND.			↓		↓	↓
TOTAL DEP.		←		←	←	←
TOTAL CLAIMS						